POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Ph*	*6261*	*10/07/16*
O.I.P.E. CLASSIFIER		48	*10/21/00*
FORMALITY REVIEW	*She*	827	11-14-00
RESPONSE FORMALITY REVIEW	*M.H*	*625*	*04.05.01*

INDEX OF CLAIMS

✔	............:.............. Rejected	N	....	Non-elected
=	.... Allowed	I	....	Interference
—	(Through numeral)... Canceled	A	....	Appeal
÷	.... Restricted	O	....	Objected

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If more than 150 claims or 10 actions
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